



IFW

CASE LA0091 NP

**CERTIFICATE OF MAILING**

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Sammy G. Duncan Jr.

Type or print name

*Sammy G. Duncan Jr.*  
Signature

8/10/04  
Date

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF

HAMANN ET AL.

APPLICATION NO: 10/712,456

FILED: NOVEMBER 13, 2003

FOR: OPEN CHAIN PROLYL UREA-RELATED MODULATORS OF  
ANDROGEN RECEPTOR FUNCTION

Mail Stop: **Box Amendment**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

In accordance with 37 C.F.R. §1.56, applicants wish to call the Examiner's attention to the references cited on the attached form(s) PTO-1449.

These references were cited in a search report in a corresponding PCT International application. Copies of these references and the search report are enclosed herewith.

The Examiner is requested to consider the foregoing information in relation to this application and indicate that each reference was considered by returning a copy of the initialed PTO 1449 form(s).

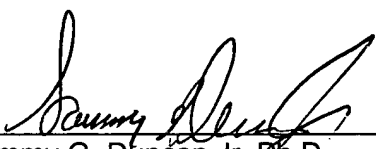


Certificate under 37 C.F.R. §1.97(e)(1)

I, the undersigned attorney, hereby certify that each item of information contained in this Information Disclosure Statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this Statement.

Respectfully submitted,

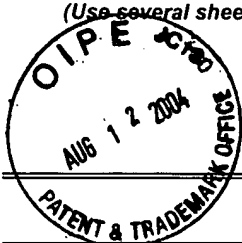
Bristol-Myers Squibb Company  
Patent Department  
P.O. Box 4000  
Princeton, NJ 08543-4000  
(609) 252-6270

  
\_\_\_\_\_  
Sammy G. Duncan Jr. Ph.D.  
Attorney for Applicants  
Reg. No. 46,675

Date: 8/10/04

FORM-PTO-1449  
(REV. 7-85)U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE**INFORMATION DISCLOSURE CITATION**

(Use several sheets if necessary)


**ATTY. DOCKET NO.**  
 LA0091 NP  
**APPLICATION NO.**  
 10/712,456  
**APPLICANT**  
 HAMANN ET AL.  
**FILING DATE**  
 NOVEMBER 13, 2003

Group

**U.S. PATENT DOCUMENTS**

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE
	AA						
	AB						
	AC						
	AD						
	AE						
	AF						
	AG						
	AH						
	AI						
	AJ						
	AK						
	AL						

**FOREIGN PATENT DOCUMENTS**

		DOCUMENT NUMBER	DATE	OFFICE	CLASS	SUBCLASS	TRANSLATION	
							YES	NO
	AM	WO 01/72705	10/4/01	PCT			<input type="checkbox"/>	<input type="checkbox"/>
	AN	WO 02/18335	3/7/02	PCT			<input type="checkbox"/>	<input type="checkbox"/>
	AO						<input type="checkbox"/>	<input type="checkbox"/>
	AP						<input type="checkbox"/>	<input type="checkbox"/>
	AQ						<input type="checkbox"/>	<input type="checkbox"/>

**OTHER DOCUMENTS** (Including Author, Title, Date, Pertinent pages, Etc.)

	AR	
	AS	
	AT	

**EXAMINER****DATE CONSIDERED**

\*EXAMINER: Initial of reference considered, whether or not citation is in conformance with MPEP 609: Draw a line through citation if not in conformance and not considered. Include a copy of this form with the next communication to applicant.